Form NLRB - 501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

2022 A.R. 18

DO NOT WRITE IN THIS SPACE

Case Date Filed

08-CA-294260

4-18-22

File an original with NLRB Regional Director for the re	egion in which the alleged unfair labor practic	ce occurred or is occurring.	
1	. EMPLOYER AGAINST WHOM CHARGE	IS BROUGHT	
a. Name of Employer Kenyon College		b. Tel. No. (740)427-5000	
		c. Cell No.	
d. Address (Street, city, state, and ZIP code) 106 College Park Drive, Gambier, OH	e. Employer Representative Sean Decatur	f. Fax No.	
43022	President	g. e-mail	
		h. Number of Workers Employed	
		Approx. 480	
 Type of Establishment (factory, mine, wholesaler, etc.) 	j. Identify Principal Product or Service		
School	Higher education		
The above-named employer has engaged in and is Labor Relations Act, and these unfair labor practices practices affecting commerce within the meaning of the 2. Basis of the Charge (set forth a clear and concises).	are practices affecting commerce within the ne Act and the Postal Reorganization Act.	meaning of section 8(a), subsections (1) and of the National meaning of the Act, or these unfair labor practices are	
with, restrained, and coerced, and is interself-organization, to form, join or assist lab	rfering with, restraining, and coerd or organizations, to bargain collect is for the purpose of collective barga	officers, agents, and representatives, has interfered ting its employees, in the exercise of their rights to tively through representatives of their own choosing, aining or other mutual aid or protection, or to refrain a said Act.	
Specifically, since on or about February 2.	2022, the Employer, through the	b) (6), (b) (7)(C)	

has coerced employees in the exercise of their Section 7 rights by telling them they were not employees within the meaning of the Act. The Employer has since maintained this position.

3. Explorate of parts filing charge (if labor organization, give full name, including local name and number)

(b) (6), (b) (7)(C)	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No.
	4d. Fax No.
	4e. e-mail (b) (6), (b) (7)(C)
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be fill	ed in when charge is filed by a labor organization)
	Table
6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.	Tel No (b) (6), (b) (7)(C)
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.	Tel. No. (b) (6), (b) (7)(C) Office, if any, Cell No.
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

: www.nlrb.gov Dow

REGION 8 1240 E 9TH ST STE 1695 CLEVELAND, OH 44199-2086

Agency Website: www.nlrb.gov Download Telephone: (216)522-3715 NLRB Fax: (216)522-2418 Mobile App

April 19, 2022



Re: Kenyon College Case 08-CA-294260

Dear (b) (6), (b) (7)(C)

The charge that you filed in this case on April 18, 2022 has been docketed as case number 08-CA-294260. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney KAREN N. NEILSEN whose telephone number is (216)303-7384. If this Board agent is not available, you may contact Regional Attorney GREGORY GLEINE whose telephone number is (216)303-7365.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, <u>www.nlrb.gov</u>, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: As the party who filed the charge in this case, it is your responsibility to meet with the Board agent to provide a sworn affidavit, or provide other witnesses to provide sworn affidavits, and to provide relevant documents within your possession. Because we seek to resolve labor disputes promptly, you should be ready to promptly present your affidavit(s) and other evidence. If you have not yet scheduled a date and time for the Board agent to take your affidavit, please contact the Board agent to schedule the affidavit(s). If you

fail to cooperate in promptly presenting your evidence, your charge may be dismissed without investigation.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence</u>: All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

IVA Y. CHOE Regional Director

IC/kw



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

Agency Website: www.nlrb.gov Telephone: (216)522-3715 Fax: (216)522-2418



April 19, 2022

Sean Decatur, President Kenyon College 106 College Park Drive Gambier, OH 43022

REGION 8 1240 E 9TH ST

STE 1695

CLEVELAND, OH 44199-2086

Re: Kenyon College Case 08-CA-294260

Dear Mr. Decatur:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney KAREN N. NEILSEN whose telephone number is (216)303-7384. If this Board agent is not available, you may contact Regional Attorney GREGORY GLEINE whose telephone number is (216)303-7365.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing Form NLRB-4701, Notice of Appearance. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor requests to limit our use of position statements or evidence. Specifically, any material you submit may be introduced as evidence at a hearing before an administrative law judge regardless of claims of confidentiality. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Further, the Freedom of Information Act may require that we disclose position statements or evidence in closed cases upon request, unless an exemption applies, such as those protecting confidential financial information or personal privacy interests.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence:</u> All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not

have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. Please ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

IVA Y. CHOE Regional Director

IC/kw

Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

FORM NLRB-5081	NATIONAL LABOR RELA	ATIONS BOARD				
QUESTIONNAIRE ON COMMERCE INFORMATION						
Please read carefully, answer all applicable items, and return to the NLRB Office. If additional space is required, please add a page and identify item number.						
CASE NAME	otali to tilo HEND Office. Il daditi		CASE NUMBER	•		
			08-CA-294260			
1. EXACT LEGAL TITLE OF ENTITY (As filed	with State and/or stated in legal	documents forming entity)				
2. TYPE OF ENTITY						
[] CORPORATION [] LLC [] LLP	PARTNERSHIP [] SOL	E PROPRIETORSHIP [] OTHE	R (Specify)			
3. IF A CORPORATION or LLC						
A. STATE OF INCORPORATION	B. NAME, ADDRESS, AND	RELATIONSHIP (e.g. parent, subsid	iary) OF ALL RELATED	ENTITIES		
OR FORMATION						
4 TEANIA COD ANN TUDE OF BADTNEDGE	ID FULL MARK AND ADDRESS	Sec of ALL MEMBERS OF BAR	NED C			
4. IF AN LLC OR ANY TYPE OF PARTNERSE	IIP, FULL NAME AND ADDRI	ESS OF ALL MEMBERS OR PART	NEKS			
5. IF A SOLE PROPRIETORSHIP, FULL NAM	E AND ADDRESS OF PROPRI	IETOR				
6. BRIEFLY DESCRIBE THE NATURE OF YO	UR OPERATIONS (Products h	andled or manufactured, or nature of s	ervices performed).			
	·					
7A. PRINCIPAL LOCATION:	7B. BRANC	H LOCATIONS:				
8. NUMBER OF PEOPLE PRESENTLY EMPL	OVED					
Δ ΤΟΤΔΙ:	B AT THE ADDRESS INV	OLVED IN THIS MATTER:				
A. TOTAL:	B. AT THE ADDRESS INV		I VEAD (EV DATES	1		
A. TOTAL: 9. DURING THE MOST RECENT (Check the ap)		
	propriate box): [] CALENDAL	R []12 MONTHS or []FISCA	YES) NO		
DURING THE MOST RECENT (Check the ap A. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAR	e your State? If no, indicate actual value	YES	NO NO		
DURING THE MOST RECENT (Check the ap Did you provide services valued in excess of \$50 \$ B. If you answered no to 9A, did you provide services.	propriate box): [] CALENDAR 0,000 directly to customers outside es valued in excess of \$50,000 to	e your State? If no, indicate actual value customers in your State who purchase	YES	NO NO		
DURING THE MOST RECENT (Check the ap A. Did you provide services valued in excess of \$50 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly of the service goods.	propriate box): [] CALENDAR 0,000 directly to customers outside es valued in excess of \$50,000 to	e your State? If no, indicate actual value customers in your State who purchase	YES	NO NO		
DURING THE MOST RECENT (Check the ap Did you provide services valued in excess of \$50 \$ B. If you answered no to 9A, did you provide services.	propriate box): [] CALENDAR 0,000 directly to customers outside ces valued in excess of \$50,000 to outside your State? If no, indicate	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you	YES d	NO NO		
DURING THE MOST RECENT (Check the ap A. Did you provide services valued in excess of \$50 S	propriate box): [] CALENDAR 0,000 directly to customers outside res valued in excess of \$50,000 to outside your State? If no, indicate the services valued in excess of \$50	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you	YES d	NO NO		
DURING THE MOST RECENT (Check the appearance) A. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAR 0,000 directly to customers outside ces valued in excess of \$50,000 to outside your State? If no, indicate le services valued in excess of \$50 stations, commercial buildings, e	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concern	YES d , , ns?	NO NO		
A. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAR 0,000 directly to customers outside ces valued in excess of \$50,000 to outside your State? If no, indicate le services valued in excess of \$50 stations, commercial buildings, e	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concern	YES d , , ns?	NO NO		
DURING THE MOST RECENT (Check the appearance) A. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAR 0,000 directly to customers outside es valued in excess of \$50,000 to outside your State? If no, indicate le services valued in excess of \$50 stations, commercial buildings, e irectly to customers located outside	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate your State?	YES d , ns?	NO NO		
A. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAR 0,000 directly to customers outside tes valued in excess of \$50,000 to putside your State? If no, indicate te services valued in excess of \$50 stations, commercial buildings, e irectly to customers located outside ted in excess of \$50,000 directly to	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate ocustomers located inside your State.	YES d , ns?	NO NO		
D. DURING THE MOST RECENT (Check the approximate) A. Did you provide services valued in excess of \$50 \$50 \$50 \$50 \$100 \$100 \$100 \$100 \$10	propriate box): [] CALENDAR 0,000 directly to customers outside tes valued in excess of \$50,000 to putside your State? If no, indicate te services valued in excess of \$50 stations, commercial buildings, e irectly to customers located outside ted in excess of \$50,000 directly to from directly outside your State	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amounts of the customers located inside your State of the your State of t	YES d , ns? icate who nt.	NO NO		
D. During the Most recent (Check the approximate) A. Did you provide services valued in excess of \$50 \$50 \$50 \$50 \$100 \$100 \$100 \$100 \$10	propriate box): [] CALENDAR 0,000 directly to customers outside tes valued in excess of \$50,000 to putside your State? If no, indicate te services valued in excess of \$50 stations, commercial buildings, e irectly to customers located outside ted in excess of \$50,000 directly to from directly outside your State	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amounts of the customers located inside your State of the your State of t	YES d , ns? icate who nt.	NO NO		
D. DURING THE MOST RECENT (Check the approximate) A. Did you provide services valued in excess of \$50 \$50 \$50 \$50 \$100 \$100 \$100 \$100 \$10	propriate box): [] CALENDAR 0,000 directly to customers outside ces valued in excess of \$50,000 to outside your State? If no, indicate de services valued in excess of \$50 stations, commercial buildings, exitectly to customers located outside ded in excess of \$50,000 directly to from directly outside your State excess of \$50,000 from directly outside excess of \$50,000 from directly outside	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amountside your State? If less than \$50,000 to customers located inside your State of the your State? If less than \$50,000 to customers located inside your State of the your State? If less than \$50,000 to customers located inside your State?	YES d , ns? icate who nt.	NO NO		
A. Did you provide services valued in excess of \$50. B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly oprovided. \$	propriate box): [] CALENDAR 0,000 directly to customers outside ces valued in excess of \$50,000 to outside your State? If no, indicate le services valued in excess of \$50 stations, commercial buildings, e irectly to customers located outside and in excess of \$50,000 directly to 0 from directly outside your State excess of \$50,000 from directly outside excess of \$50,000 from directly outside excess of \$50,000 from enterprises	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amountside your State? If less than \$50,000 to customers located inside your State of the your State? If less than \$50,000 to customers located inside your State of the your State? If less than \$50,000 to customers located inside your State?	YES d , ns? icate who nt.	NO NO		
A. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAR 2,000 directly to customers outside tes valued in excess of \$50,000 to toutside your State? If no, indicate the services valued in excess of \$50 stations, commercial buildings, est trectly to customers located outside ted in excess of \$50,000 directly to the form directly outside your State the first stations of \$50,000 from enterprises indicate amount. \$	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amounts tile your State? If less than \$50,000 indicate amounts to customers located inside your State? If less than \$50,000 who received the goods directly from	YES d , ns? icate who nt.	NO NO		
D. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAR 2,000 directly to customers outside the valued in excess of \$50,000 to putside your State? If no, indicate the services valued in excess of \$50 stations, commercial buildings, est the irectly to customers located outside the in excess of \$50,000 directly to the form directly outside your State the first of \$50,000 from directly outside your State the indicate amount. \$ the first of \$50,000 from enterprises the indicate amount. \$ the first of \$50,000 from or \$10,000 from or \$1	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amounts tile your State? If less than \$50,000 indicate amounts to customers located inside your State? If less than \$50,000 who received the goods directly from	YES d , ns? icate who nt.	NO NO		
A. Did you provide services valued in excess of \$50 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly or provided. \$ C. If you answered no to 9A and 9B, did you provide newspapers, health care institutions, broadcasting If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 deamount. \$ E. If you answered no to 9D, did you sell goods value purchased other goods valued in excess of \$50,000 \$ F. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you begin operations within the last 12 months.	propriate box): [] CALENDAN 0,000 directly to customers outside the valued in excess of \$50,000 to butside your State? If no, indicate the services valued in excess of \$50 stations, commercial buildings, est the	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amountside your State? If less than \$50,000 who received the goods directly from than \$100,000, indicate amount than \$100,000, indicate amount than \$100,000, indicate amount.	YES d , , ns? icate who nt.			
D. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAN 0,000 directly to customers outside the valued in excess of \$50,000 to butside your State? If no, indicate the services valued in excess of \$50 stations, commercial buildings, est the	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amountside your State? If less than \$50,000 who received the goods directly from than \$100,000, indicate amount than \$100,000, indicate amount than \$100,000, indicate amount.	YES d , , ns? icate who nt.			
A. Did you provide services valued in excess of \$50 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly or provided. \$ C. If you answered no to 9A and 9B, did you provide newspapers, health care institutions, broadcasting If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 deamount. \$ E. If you answered no to 9D, did you sell goods value purchased other goods valued in excess of \$50,000 \$ F. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you purchase and receive goods valued in eindicate amount. \$ G. Did you begin operations within the last 12 months.	propriate box): [] CALENDAR 2,000 directly to customers outside the valued in excess of \$50,000 to putside your State? If no, indicate the services valued in excess of \$50 stations, commercial buildings, existed in excess of \$50,000 directly to the office of \$50,000 from directly outside your State axcess of \$50,000 from directly outside your State axcess of \$50,000 from enterprises indicate amount. \$ for services (Check the largest amount of \$1,000,000 or more if less onths? If yes, specify date:	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amountside your State? If less than \$50,000 who received the goods directly from than \$100,000, indicate amount than \$100,000, indicate amount than \$100,000, indicate amount.	YES d , , ns? icate who nt.			
A. Did you provide services valued in excess of \$50 \$	propriate box): [] CALENDAN 1,000 directly to customers outside 2,000 directly to customers outside 2,000 directly to customers outside 2,000 directly in excess of \$50,000 to 2,000 directly in excess of \$50,000 directly to 3,000 directly outside your State 4,000 from directly outside your State 5,000 from directly outside your State 6,000 from enterprises 6,000 from enterprises 6,000 from enterprises 6,000 from or enterprises 6,000 fro	e your State? If no, indicate actual value customers in your State who purchase the value of any such services you 0,000 to public utilities, transit systems ducational institutions, or retail concerne your State? If less than \$50,000, indicate amountside your State? If less than \$50,000 who received the goods directly from than \$100,000, indicate amount.	YES d ns? icate who nt. LECTIVE BARGAININ			

12. AUTHORIZED REPRESENTATIVE COMPLETING THIS QUESTIONNAIRE NAME AND TITLE (Type or Print) SIGNATURE

NAME AND TITLE (Type or Print) SIGNATURE E-MAIL ADDRESS DATE

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.

UNITED STATES OF AMERICA

BEFORE THE NATIONAL LABOR RELATIONS BOARD

KENYON COLLEGE Charged Party and (b) (6), (b) (7)(C)	Case 08-CA-294260
Charging Party	
AFFIDAVIT OF SERVICE OF CHARGE AGA I, the undersigned employee of the National Lab April 19, 2022, I served the above-entitled doct following persons, addressed to them at the following Sean Decatur, President Kenyon College 106 College Park Drive Gambier, OH 43022	or Relations Board, state under oath that on ument(s) by post-paid regular mail upon the
April 19, 2022	Kim Wallace, Designated Agent of NLRB
Date	Name
	/s/ Kim Wallace

Signature